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APPLICATION NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO
09/696,169	10/26/2000	424	1644	1614-244P
APPLICANT RUDOLF VALENTA, THERESIENFELD, AUSTRIA; SUSANNE VRTALA, VIENNA, AUSTRIA; SABINE STUMVOLL, ST. PETER, AUSTRIA; HANS GRONLUND, LIDINGO, SWEDEN; MONIKA GROTE, MUNSTER, FED REP GERMANY; LUCA VANGELISTA, PADOVA, ITALY; <i>ok p-4</i> ANNALISA PASTORE, LONDON, UNITED KINGDOM; WOLFGANG R SPERR, VIENNA, AUSTRIA; PETER VALENT, VIENNA, AUSTRIA; DIETRICH KRAFT, VIENNA, AUSTRIA.				
CONTINUING DOMESTIC DATA*** VERIFIED PROVISIONAL APPLICATION 60/164,148 11/08/1999 <i>ok</i> <i>Pnt</i>				
371 (NAT'L STAGE) DATA*** VERIFIED <i>None. Pnt</i>				
FOREIGN APPLICATIONS*** VERIFIED SWEDEN 9903950-5 10/29/1999 <i>ok</i> <i>Pnt</i>				
FOREIGN FILING LICENSE GRANTED 12/20/2000				
Foreign priority claimed <input checked="" type="radio"/> yes <input type="radio"/> no 35 USC 119 (a-d) conditions met <input checked="" type="radio"/> yes <input type="radio"/> no <input type="radio"/> Met after. Allowance		STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS
Verified and acknowledged <i>ply N. 2/1/01 Pnt</i> Examiner's Name Initials		ATX	11	12
INDEPENDENT CLAIMS 2				
ADDRESS BIRCH STEWART KOLASCH & BIRCH PO BOX 747 FALLS CHURCH , VA 22040-0747				
TITLE NON-ANAPHYLACTIC FORMS OF GRASS POLLEN PHL P 6 ALLERGEN AND THEIR USE				
FILING FEE RECEIVED \$****0	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		O All Fees O 1.16 Fees (Filing) O 1.17 Fees (Processing Ext. of Time) O 1.18 Fees (Issue) O Other _____ O Credit	